Introduced by Senator Yee

February 20, 2013

An act to amend Section 2241.5 add Chapter 7.75 (commencing with Section 3550) to Division 2 of the Business and Professions Code, relating to medicine healing arts.

LEGISLATIVE COUNSEL'S DIGEST

SB 410, as amended, Yee. Health care: controlled substances and dangerous drugs. Anesthesiologist assistants.

Existing law, the Medical Practice Act, provides for the licensure and regulation of physicians and surgeons by the Medical Board of California.

This bill would enact the Anesthesiologist Assistant Practice Act, which would require the licensure and regulation of anesthesiologist assistants by the Medical Board of California and would prescribe the services that may be performed by a radiologist assistant under the supervision of a qualified physician and surgeon. The bill would make it a crime for a person to practice as an anesthesiologist assistant without a license or for an anesthesiologist assistant to practice outside the scope of his or her practice, as specified, thereby imposing a state-mandated local program. The bill would require the board to adopt regulations relating to the licensure of radiologist assistants and certification of approved programs by July 1, 2014, and would require the board to commence licensure and certification on that date.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state.

 $SB 410 \qquad \qquad -2-$

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Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Existing law authorizes a physician and surgeon to prescribe for, or dispense or administer to, a person under his or her treatment for a medical condition, drugs or prescription controlled substances for the treatment of pain or a condition causing pain, including intractable pain. Existing law requires the physician and surgeon to exercise reasonable care in determining whether a particular patient or condition, or complexity of the patient's treatment, including, but not limited to, a current or recent pattern of drug abuse, requires consultation with, or referral to, a more qualified specialist.

This bill would specify that chronic pain is included among the types of pain for which these drugs or substances may be prescribed.

Vote: majority. Appropriation: no. Fiscal committee: no-yes. State-mandated local program: no-yes.

The people of the State of California do enact as follows:

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SECTION 1. Chapter 7.75 (commencing with Section 3550)
is added to Division 2 of the Business and Professions Code, to read:

CHAPTER 7.75. ANESTHESIOLOGIST ASSISTANTS

Article 1. General Provisions

This chapter shall be known and cited as the
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3550. This chapter shall be known and cited as the Anesthesiologist Assistant Practice Act.

3550.5. For the purposes of this chapter, the following definitions shall apply:

- (a) "Anesthesiologist" means a physician and surgeon who has completed a residency in anesthesiology approved by the American Board of Anesthesiology or the American Osteopathic Board of Anesthesiology.
- (b) "Anesthesiologist assistant" means a person who meets the requirements of Section 3553 and provides health care services delegated by a licensed anesthesiologist.
 - (c) "Board" means the Medical Board of California.

-3- SB 410

3551. *Notwithstanding* any other law. licensed a anesthesiologist assistant may assist the supervising anesthesiologist in developing and implementing an anesthesia care plan for a patient. In providing assistance to the supervising anesthesiologist, an anesthesiologist assistant may do all of the following:

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- (a) Obtain a comprehensive patient history, perform relevant elements of a physical examination, and present the patient history to the supervising anesthesiologist.
- (b) Pretest and calibrate anesthesia delivery systems and obtain and interpret information from the systems and monitors, in consultation with an anesthesiologist.
- (c) Assist the supervising anesthesiologist with the implementation of medically accepted monitoring techniques.
- (d) Establish basic and advanced airway interventions, including intubation of the trachea and performing ventilatory support.
- (e) Administer intermittent vasoactive drugs and start and adjust vasoactive infusions.
- (f) Administer anesthetic drugs, adjuvant drugs, and accessory drugs.
- (g) Assist the supervising anesthesiologist with the performance of epidural anesthetic procedures, spinal anesthetic procedures, and other regional anesthetic techniques.
 - (h) Administer blood, blood products, and supportive fluids.
- (i) Provide assistance to a cardiopulmonary resuscitation team in response to a life threatening situation.
- (j) Participate in administrative, research, and clinical teaching activities as authorized by the supervising anesthesiologist.
- (k) Perform other tasks not prohibited by law under the supervision of a licensed anesthesiologist that an anesthesiologist assistant has been trained and is proficient to perform.
- 3551.5. The board may adopt, amend, and repeal regulations as may be necessary to enable it to carry into effect this chapter. All regulations shall be in accordance with, and not inconsistent with, this chapter. All regulations shall be adopted, amended, or repealed in accordance with Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.
- 3551.7. No person other than one licensed to practice as an anesthesiologist assistant shall practice as an anesthesiologist

SB 410 —4—

assistant or in a similar capacity to an anesthesiologist or hold himself or herself out as an "anesthesiologist assistant."

Article 2. Licensure

- 3552. The board shall adopt regulations consistent with this chapter for the consideration of applications for licensure as an anesthesiologist assistant no later than July 1, 2014.
- 3553. Commencing July 1, 2014, the board shall issue a license to each anesthesiologist assistant applicant who meets each of the following requirements:
- (a) Has graduated from an anesthesiologist assistant program accredited by the American Medical Association's Committee on Allied Health Education and Accreditation or by its successor agency.
- (b) Has passed the certifying examination administered by the National Commission on Certification of Anesthesiologist Assistants.
- (c) Has active certification by the National Commission on Certification of Anesthesiologist Assistants.

Article 3. Penalties

- 3554. Any person who violates Section 3551.7 shall be guilty of a misdemeanor punishable by imprisonment in a county jail not exceeding six months, or by a fine not exceeding one thousand dollars (\$1,000), or by both.
- SEC. 2. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.
- SECTION 1. Section 2241.5 of the Business and Professions Code is amended to read:
- 2241.5. (a) A physician and surgeon may prescribe for, or dispense or administer to, a person under his or her treatment for

5 SB 410

a medical condition dangerous drugs or prescription controlled substances for the treatment of pain or a condition causing pain, including, but not limited to, chronic pain or intractable pain.

- (b) No physician and surgeon shall be subject to disciplinary action for prescribing, dispensing, or administering dangerous drugs or prescription controlled substances in accordance with this section.
- (c) This section shall not affect the power of the board to take any action described in Section 2227 against a physician and surgeon who does any of the following:
- (1) Violates subdivision (b), (c), or (d) of Section 2234 regarding gross negligence, repeated negligent acts, or incompetence.
 - (2) Violates Section 2241 regarding treatment of an addict.
- (3) Violates Section 2242 regarding performing an appropriate prior examination and the existence of a medical indication for prescribing, dispensing, or furnishing dangerous drugs.
 - (4) Violates Section 2242.1 regarding prescribing on the Internet.
- (5) Fails to keep complete and accurate records of purchases and disposals of substances listed in the California Uniform Controlled Substances Act (Division 10 (commencing with Section 11000) of the Health and Safety Code) or controlled substances scheduled in the federal Comprehensive Drug Abuse Prevention and Control Act of 1970 (21 U.S.C. Sec. 801 et seq.), or pursuant to the federal Comprehensive Drug Abuse Prevention and Control Act of 1970. A physician and surgeon shall keep records of his or her purchases and disposals of these controlled substances or dangerous drugs, including the date of purchase, the date and records of the sale or disposal of the drugs by the physician and surgeon, the name and address of the person receiving the drugs, and the reason for the disposal or the dispensing of the drugs to the person, and shall otherwise comply with all state recordkeeping requirements for controlled substances.
- (6) Writes false or fictitious prescriptions for controlled substances listed in the California Uniform Controlled Substances Act or scheduled in the federal Comprehensive Drug Abuse Prevention and Control Act of 1970.
- (7) Prescribes, administers, or dispenses in violation of this chapter, or in violation of Chapter 4 (commencing with Section 11150) or Chapter 5 (commencing with Section 11210) of Division 10 of the Health and Safety Code.

SB 410 —6—

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(d) A physician and surgeon shall exercise reasonable care in determining whether a particular patient or condition, or the complexity of a patient's treatment, including, but not limited to, a current or recent pattern of drug abuse, requires consultation with, or referral to, a more qualified specialist.

(e) Nothing in this section shall prohibit the governing body of a hospital from taking disciplinary actions against a physician and surgeon pursuant to Sections 809.05, 809.4, and 809.5.